Indiana State Department of Health
Breast and Cervical Cancer Program
Just the Fax----30 August 2004

Timeliness of Diagnostic Services for Follow-up of Pap Test Abnormalities

The Indiana Breast and Cervical Cancer Program (IN-BCCP) is evaluated twice annually by the Centers for Disease Control and Prevention (CDC). A formal review of standardized data elements is conducted to monitor clinical outcomes and to ensure complete and consistent data collection among all breast and cervical cancer programs in the country. Continued improvement in timeliness of services for IN-BCCP participants with abnormal cervical findings is imperative.

Pap test results which require diagnostic evaluation:

- Atypical Squamous Cell—cannot exclude High Grade lesion (ASC-H)
- Atypical Glandular Cells—all subcategories (AGC)
- High Grade Squamous Intraepithelial lesions (HSIL)
- Squamous Cell Carcinoma

Pap test results for which diagnostic evaluation is highly recommended:

- Low Grade Squamous Intraepithelial lesions (LSIL)

The IN-BCCP definition of a diagnostic evaluation is minimally consistent with a colposcopy that may or may not include cervical biopsy.

The goal is to have a completed diagnostic evaluation within 60 days from the date of any of the above Pap test findings.

On the most recent CDC evaluation, IN-BCCP data indicated 37.6% of diagnostic evaluations for abnormal Pap test results fell outside the 60 day timeframe. The target percentage is 25%.

Awareness and close collaboration with IN-BCCP case management staff is recommended to improve these outcomes. Thank you for your assistance in assuring the health of these women.